## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further on dicated unless correcte maintenance fee notificat	correspondence includired below or directed other	ng the Patent, advance of nerwise in Block 1, by (	orders and notification (a) specifying a new of	of m	aintenance fees with condence address;	ill be i and/or	mailed to the current (b) indicating a separ	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
24737	7590 06/01	/2009		nave			of Mailing or Transr	niccion	
P.O. BOX 3001	ELLECTUAL PRO IANOR, NY 10510	OPERTY & STAN	NDARDS	I her State addre trans	eby certify that this s Postal Service wessed to the Mail mitted to the USPT	Fee(s ith suff Stop O (57)	of Maining of Transis 5) Transmittal is being ficient postage for first ISSUE FEE address 1) 273-2885, on the da	deposited with the United class mail in an envelope above, or being facsimile te indicated below.	
								(Depositor's name)	
		(Signature)							
								(Date)	
APPLICATION NO. FILING DATE		FIRST NAMED INVE		NTOR	TTOR ATT		TORNEY DOCKET NO. CONFIRMATION NO		
10/555,752 11/04/2005		Robert Albertus Bro		ndijk	ijk		NL 030509	2530	
TITLE OF INVENTION:	: METHOD FOR RECO	ORDING A LEAD-OUT	ON AN OPTICAL D	ISC					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE 1	DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO		\$1510 \$300		\$0		\$1810	09/01/2009	
EXAMINER		ART UNIT	CLASS-SUBCLAS						
SASINOWSKI, ANDREW		2627	369-030040						
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AI	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print	or typ	e)				
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIC	n in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NC	e data will appear on the DT a substitute for filing (B) RESIDENCE: (6)	ig an a	ssignment.			cument has been filed for	
Koninklijk	` ´	Eindhoven, The Netherlans			ans				
_	-				_			_	
Please check the appropri	ate assignee category or	categories (will not be p	orinted on the patent):		Individual 🚨 Co	rporati	on or other private gro	up entity 🖵 Government	
Ia. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1270 (enclose an extra copy of this form).						
_ ~ .	tus (from status indicated		_						
	s SMALL ENTITY statu						TITY status. See 37 CF		
NOTE: The Issue Fee and neterest as shown by the r	d Publication Fee (if requeecords of the United Sta	uired) will not be accepted tes Patent and Trademar	ed from anyone other t k Office.	han th	e applicant; a regis	tered a	ittorney or agent; or the	e assignee or other party in	
Authorized Signature/Michael E. Belk/					Date	Ser	ptember 1,	2009	
Typed or printed name <u>Michael E. Belk</u>					Registration No	o	33,357		
This collection of information application. Confident ubmitting the completed his form and/or suggestion	ation is required by 37 C iality is governed by 35 I application form to the ons for reducing this bu	CFR 1.311. The informati U.S.C. 122 and 37 CFR USPTO. Time will var rden, should be sent to the	ion is required to obtait 1.14. This collection y depending upon the he Chief Information (	n or re is esti indivi Office	etain a benefit by the mated to take 12 m dual case. Any con tr, U.S. Patent and T	e publ ninutes nment Traden	ic which is to file (and to complete, including s on the amount of tin nark Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and the you require to complete the to Commerce, P.O.	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.